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ABSTRACT

One component of the final report of a 3-year project to train speech language pathologists and audiologists to deliver services to young children (birth to age 5) with communication disorders, the paper describes the parent education practicum model developed by the project. The underlying philosophical foundation of the training was to adapt to the individual interests and needs of each family based on the INREAL (Inter-reactive learning) model for effective communication. In addition to the parent training program, activities offered to parents included a parent orientation to the Child Language Center (CLC) in Boulder, Colorado, parent meetings, parent observation of the CLC, social activities, and parent conferences. The parent/child interaction training program included: classroom observation by parent/s and trainer, in-home video taping of the family, viewing and discussion of video by parent/s and trainer, and parent discussion group. Training in the parent component was received by four graduate students and their training goals are outlined. A case study demonstrating the interface of family, trainees, and trainer completes the report. (DB)

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Parent Education Practicum Model
Theoretical and Philosophical Basis for the Parent Program

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Final Report for the United States Department of Education: Special Project for the Preparation of Speech Pathologists and Audiologists to Provide Competent Services to Handicapped Children, Birth to Age 5.
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EC 210379

PARENT EDUCATION PRACTICUM MODEL

Theoretical and Philosophical Basis for the Parent Program

Parent programs have typically focused on education, counseling and/or training from the perspective of the child's disabilities and needs, and from the perspective of the program's model of service delivery. As children have had to fit categorical definitions for service delivery, parents -- most typically mothers -- have had to fit into generic parent programs. The concept of a single fix-it model with a deficit orientation is no more appropriate or effective with children than it is with parents and families. By responding to concerns identified by parents and supporting their existing skills, the professional can assist in bridging the gaps in parents' skills and information.

The underlying philosophical foundation of this training is to adapt to the individual interests and needs of each family. Theoretical basis for this stance is founded in research related to adult learning and the INREAL model for effective communication. Inter-reactive learning (INREAL) uses conversation in a conscious manner for facilitating learning. Through active listening and expansion on observations made by parents, the professional addresses the parents' concerns and needs rather than a preconceived agenda. Issues related to education, training and/or counseling are thereby addressed in a personal and timely manner thus facilitating growth and learning. A strengths based, devel-

opmentally sensitive program with awareness of the unpredictable and non linear nature of the grieving process was offered to the families of children with special needs enrolled in the Child Language Center.

Focus: The Parent

The overall parent program consisted of a number of options for parent involvement. In keeping with the philosophy of this project, options were designed to address a range of needs. Options reflected: time commitment, time of day, place (home, school or social focus), one to one or group experience. Over the course of the academic year it was noted that parents' interests, needs and time constraints varied and the flexibility of the program allowed responsiveness to individual family requests. Additionally, this model allowed the more hesitant parent(s) to request or partake in activities on their personal timeline, without an added pressure. Research literature and experience indicates that learning is facilitated when the learner is active in planing his/her program. The activities and options offered for parents included:

1) A parent orientation to the CLC

2) Parent Meetings - these meetings took different forms. Some were designed to provide information relevant to child development while others provided the opportunity for parents to raise personal questions and concerns regarding child rearing. The latter format allowed parents to share similar experiences and see each other as a support

system. These meetings were facilitated by a staff member, typically the parent program coordinator, a speech/language specialist, or the early childhood director. These meetings were held during both daytime and evening hours

3) Parent Observation of CLC. Parents were encouraged to observe the classroom independently or with a staff person. The program director and the parent program coordinator were available for spontaneous or scheduled observations with parents. The regular opportunity to observe also allowed parents to continue their informal contact and support for one another.

4) Social Activities - social activities such as picnics and potlucks were held a few times during the year. The frequency of these gatherings reflected family interest.

5) Parent Conferences - These occurred between parents, teachers, and student clinicians and supervisors (as applicable) three times during the year with a home visit occurring at the beginning of each semester.

6) Parent Training. Each semester a graduate student in speech/language pathology and the parent coordinator worked together with self-selected families in this specific training program. A detailed discussion of this program follows.

Discussion: Parent/Child Interaction Training

The parent/child interaction training is an observational based model to support parents in becoming more aware of their communicative style with their special needs child as well as understanding the basics of child development.

Through observation and discussion of the child's in-class experiences and observation and discussion of familial interactions by use of video taping, parents not only learned about their child's learning and communicative style, but also the particular communicative styles of the family unit. From this base of information and awareness, parents were supported to continue their use of successful interaction and were guided in how to elaborate on these. Awareness of and sensitivity to less successful interaction was developed. Together with the parents, the trainer explored alternative interaction strategies in order to further enhance communication within the family. The child with special needs was the focus. Knowledge of child development and interactive communication, the latter based on INREAL, was incorporated into observation and discussion sessions.

Components of the parent/child interaction training:

1.	Classroom observation by parent(s) and trainer	2-1 hour sessions monthly
2.	In home video taping of the family	1-1 hour session monthly
3.	Viewing and discussion of video by parent(s) and trainer	1-1 hour session monthly
4.	Parent discussion group regarding the training/ learning process	2-1 1/2 hour sessions each semester

Program Goals for the Parent

I. Parents will improve their observational skills of their child* with special needs with regard to all areas of child development (communication, cognition, social-emotional, motor and self-help).

II. Parents will improve their understanding of the role of conversation in learning.

III. Parents will enhance their natural conversational skills with their child.

IV. Parents will increase their successful communicative interactions within the family dynamic.

V. Parents will increase their understanding of how their child uses communication to learn.

VI. Parents will increase their enjoyment and feeling of success while in play with their child.

*From here on child will refer to child with special needs.

Evaluation of Parent-Child Interaction Training

In keeping with the philosophical tenets of this program, training effectiveness was evaluated by the parents receiving the training. As this overall project served the dual purpose of service delivery and preservice training, it was decided that the training evaluation tool for parents be constructed by the graduate students. Evaluation forms addressed both goals for the overall training as well as specific parent/family goals. The evaluation form was completed independently by each parent on a pre and post basis.

The evaluation included both comments and ratings directed to self, program and trainer evaluation. Areas addressed included: understanding of child's communicative style in varying situations, understanding of child's play skills and style, skill in observation and ability to express what is observed, effectiveness in conversing with the child, knowledge of child development, change in interactions as a result of training, evaluation of trainer, future needs and recommendations for changes in the training program.

Addition

The overall goal within the parent program for trainees as stated in the original grant was to provide them with information regarding the critical relationship between parent and child and actual experience in facilitating parent programs.

Focus: The Trainee

Four graduate students in the Department of CDSS were awarded traineeships for one academic year as part of their training. Each of these students directly participated in the parent program component for one semester. During the remaining two semesters their parent training focused on trainee group seminars to discuss issues and concerns in working with families. Supervision and training occurred in a multifaceted manner. The components include: 1) individual meetings with the supervisor for personal goal setting, planning, evaluation and discussion; 2) observation of the

supervisor providing direct service followed by a debriefing session; and 3) group seminars with the other trainees. Topics for group seminars included: discussion of specific families, discussion of trainee feelings and reaction to working with families, videotape viewing of parent-child-trainer interactions, role playing parent-trainer interactions, discussion of readings and presentation of theoretical information related to parent work and child development. These seminars were also open to both undergraduate and graduate students who were taking a clinical practicum in the Child Language Center. Aspects of course requirements and evaluation were outlined for the trainees in the following form:

Course Requirements:

1. Observation of parent training model
2. Implementation of parent training model with two families.
3. Trainee Seminar (1 - 1 1/2 hour session monthly, for all trainees.) (This group is open to all CLC practicum students.)
4. Individual supervision (1 1/2 hr. monthly) to address:
   a) goal setting
   b) issues and concerns regarding training
   c) video of family interaction
   d) evaluation of training

Assignments:

Readings

Journal/process notes

Video assessment of parent/child communication skills

Summary of parent discussion sessions

Trainee evaluation will be based on:

1. Self evaluation
2. Instructor's evaluation of trainee
3. Parent's evaluation of trainee
4. Written skills through journal/process note and session evaluation

Training program evaluation will be based on:

1. Trainee evaluation of course content and delivery system
2. Trainee evaluation of instructor
3. Parent evaluation of program and delivery system

The trainees within this program had both theoretical and practicum experience in working with normally developing children as well as with children having special needs. Their overall experience with the normally developing child, however, was quite limited. One of the purposes of their general training was to improve their knowledge, understanding and observational skill of the young child's behavior thereby addressing all aspects of child development. A tenet of this project was that with an increased knowledge and sensitivity to child development, speech and language specialists will be better equipped to work with families

having children with special needs. From a basis of understanding normal child development the speech-language specialist can more realistically assess a child's overall performance and functioning. This knowledge then can be used to assist parents in: 1) looking at their children realistically, 2) having appropriate expectations and 3) interacting with their child using strengths to support growth in areas of need.

Communication has been discussed in the research literature as being the vehicle which supports learning. The relationship between a primary caretaker and an infant has been documented to be of critical importance in its effect on the child's overall development. In many instances the communication between parent and special needs child is disrupted because of a variety of factors. These may include - subtle and/or unclear signals, difficulty in perceiving communication signals, delay in development of both nonverbal and verbal expression, and caretaker distress. Additionally, it has been noted that patterns in communication can become established and fixed rather than reflective of or nudging to new developmental stages. The adage of "it works, don't rock the boat," can often underlie interactive patterns and habits. In order to change interactive patterns one must be able to reflect on them with some objectivity, assess what constitutes a successful interaction and determine alternative action when interaction has been unsuccessful.

The INREAL (INter-REActive Learning) model was used as a

basis for training the trainees in communicative interaction. "INREAL is a natural conversational method of language learning for handicapped and nonhandicapped children and adults." It is based upon knowledge of: normal language development, the rules and structure of conversation, child development and learning theory and behavior. Videotape analysis of interactions is a method employed to develop awareness, sensitivity, information and skill in interactive communication. This knowledge served as a basis for the trainees in their interactions with families and as they supported families in looking at their communicative patterns.

The project's overall goals for the trainees stems from the basis of the developmental/interaction approach. That is -- effective interaction between parent and child is of primary focus rather than instruction or teaching of specific skills. The goals for the trainees were stated in the context of a developmental process with the understanding that interns are at an entry level in what is a long process of developing competency in working with families.

Goals for Trainees

Development of ability to:

1. Identify and assess the child's communicative patterns within the Child Language Center and within the family dynamic.
2. Identify strategies that will further support the child's speech-language-communicative development.

3. Understand and be sensitive to the theoretical issues while simultaneously addressing the specific issues of the individual family.
4. Work with parents to facilitate their observational skill and their understanding of their special needs child and child development in general.
5. Work together with parents to identify and further implement successful patterns of communication.
6. Gain competence and confidence in assessing the parent's feelings toward their special needs child.

Each trainee's involvement with parent training was unique. Factors which impacted on the design of their program included: the number of families who self-selected for training, trainees prior experience and skills, off campus full-time internships and a seven week summer semester. Additions to the training program included:

1. Co-planning and facilitation of in house discussion groups for parents
2. Co-planning and facilitation of a parent group at a community day care program which primarily services low-income and single parent families
3. Writing of an information-based newsletter which evolved form parent meetings
4. Attendance at public school staffings with families from the program
5. Visits to other preschools which children from the Child Language Center attended.

The match of family and trainee was made with consideration to such factors as: temperament style of trainee and parents, prior experiences of trainee, overall needs of families and time schedules. At the beginning of the semester the supervisor explained and discussed the parent-child training program at a parent meeting. Some individual explanations also occurred. After a family expressed interest in the training program, the supervisor pursued this and notified parents at the beginning of each semester as to which trainee would be working with them. Because of the supervisor's involvement with parents throughout the year she acted as a bridge of trust between parents and trainees. The trainees also put together a questionnaire for parents in order to gain further information about the families they were about to start working with. These were completed early in the semester by each parent.

In addition to the program goals set for the trainees they identified personal goals for their work with parents. During individual meetings with the supervisor these goals were discussed and any necessary revisions were made. Goals were written so that they could be rated pre and post training by the trainee. Progress with goals was discussed in subsequent meetings as well as trainees developing their own means to monitor their progress. The viewing of their videotaped family interactions, together with the supervisor, was also a consistent means of monitoring.

Training and trainee effectiveness was evaluated form

the perspective of: trainee self-evaluation, trainer evaluation and evaluation by the parents. (Refer to evaluation forms at the end of the report.)

Focus: The Trainer

The role of the speech/language pathologist specialist as parent program coordinator was to provide direct service to families within the Child Language Center, coordinate parent programs and activities and train and supervise the grant trainees in this aspect of their program. Research literature in the field of education has recently restressed the importance of the mentor model for beginning teachers. It was felt that this concept was equally meaningful for beginning speech and language specialists. The parent program coordinator therefore worked with one family each semester in the developmental interaction training component. Other direct service responsibilities included: facilitating parent group meetings within the Child Language Center, observation of the CLC with parents, viewing of videotapes with parents, individual meetings and co-planning and facilitating a parent group at a community day care center. Whenever possible sessions with parents were videotaped for the debriefing at the follow through seminars with the trainees.

Issues to be addressed in programs training students to work with the families of special needs children:

1. There is need for a one or two semester preservice course in parent work and counseling

2. A mentor model for service delivery is relevant and appropriate
3. Adequate supervision of trainees is critical
4. Training (theoretical and practical) in normal child development is essential for students of speech and language pathology
5. Typically trust between parents and trainees builds slower than between parents and experienced professionals
6. Time schedules for families, trainees and supervisor are frequently influx and challenging to coordinate
7. Time and trust development are critical to obtaining fairly natural in-home videos of family interactions
8. After one semester of the parent-child developmental interaction training, both parents and trainees were just beginning to find the rhythm of working together
9. If we value the interface and team work of parent and professional, we need to find a way to build this type of training into the speech pathology and audiology graduate level curriculum

A brief discussion of a case study follows in order to demonstrate the interface of family, trainees and trainer. The family consists of two parents and a child of four years at the time of enrollment at the Child Language Center. The parents are bilingual-bicultural having immigrated from Cambodia approximately two years prior to their child's birth. At the time of our initial contact with the family they had

recently moved to Colorado from another state. Their few surviving extended family members lived in other parts of the United States.

The child, referred to as "K" in this report, had a medical history from approximately 6 months of age of severe allergies, recurrent otitis media and poor weight gain. Because of the child's medical problems, the cold climate in which the family lived and the social-cultural adjustment difficulties, mother and child remained isolated much of the time. Upon entry to our program, both parents spoke some English. "K," however, was non-verbal, comprehended little in either the family's first language or in English and demonstrated deviant social behavior. He had never received a developmental diagnostic evaluation. The family was referred to our center by a preschool program which he attended two mornings a week. This program offered no special services.

Soon into the family's enrollment in the Child Language Center it was apparent that they were eager for information and support. "K" received a complete diagnostic evaluation and staffing (the procedure is outlined in section VI. of the grant project report). Both parents then expressed interest in parent-child training. Because of the complexity of the family issues, the parent coordinator/trainer assumed the case as a demonstration model and remained involved for two semesters. The goals from training identified by the parents included: 1) to develop more effective and satisfying interactions with their child, 2) to learn

how to talk to their child and 3) to understand more about how children learn. In addition to these goals the trainer focused on expanding the family's support system. A grant trainee was frequently present at meetings with the parents in the capacity of observer or as videotape operator. The program of classroom observations, in-home videotaping and subsequent discussion and group parent meetings was followed. Both parents were active participants. During the home visits many occasions presented themselves and were requested by the parents for the trainer to demonstrate interaction with "K." Alternative methods of non-verbal and verbal interaction could be demonstrated when contextually appropriate and were followed by immediate discussion. Some behaviors were modelled because of specific request while others were considered to be important by the trainer. Adherence to topic initiation by the parents was considered to be important to successful training. The benefit of these in-home sessions extended to the classroom staff as the child's overall behavior (social, linguistic, cognitive and motor) was significantly different at home than at school. The videotapes of parents, trainer and child interactions were an extremely useful teaching tool in the trainee seminars.

"K's" growth as a communicator is evident and continues both at home and at school. It has been a dynamic learning experience for all aspects of the program.

EVALUATION OF STUDENT IN PARENT EDUCATION PROGRAM

Student's Name: _____

Supervisor's Name: _____

Rating Code:
U 1
S- 2
S 3
S+ 4
O 5

_____ 1. Professional qualities

_____ 2. Interpersonal skills

_____ 3. Completion of required reading list and special project

_____ 4. Competency and sensitivity in conducting individual parent training in parent/child interaction

_____ 5. Competency in planning and conducting parent meetings

_____ 6. Effectiveness and sensitivity in one-on-one interactions

_____ 7. Competency in written reporting